

TRAINING MODULE EVALUATION

(Please complete the information as requested and FAX to MJJI DL Team @ (517) 373-7615)

Title of Training Module: _____

Your Name (Optional): _____ Date: _____

Your Court (Optional): _____

City / State _____

1. How did you acquire this print module

___ From my supervisor

___ From my training coordinator

___ From the Michigan Supreme Court / Michigan Judicial Institute website

___ Other: _____

2. On a scale of 1 to 5, how well did this training module inform you on the topic?

1

2

3

4

5

(Not at all useful)

(Excellent resource)

3. What formats did you enjoy the most? (Put "1" by 1st choice, "2" by 2nd choice, etc.)

PLEASE NOTE: Not all formats will be utilized in every print packet. Choose only those that apply to the packet title above.

___ Puzzles / games

___ Quotes

___ Statistics / charts / graphs

___ Self-assessment check lists

___ Scenarios (examples of situations that may happen)

___ True or false

___ Magazine articles

___ Other: _____

4. Did your court offer a training session with a facilitator to go along with this print module topic?

___ YES

___ NO

5. Suggestions or comments regarding this training module. (*Use another page of paper if needed*).